Conclusions: Coronary implantation of BES or SES is associated with similar event rates at 12-month follow-up in patients with, and without, diabetes.

TCT-348

The Effect of Drug-Eluting Stents on Clinical and Angiographic Outcomes in Diabetic Patients, 3 Years Result: Multicenter Registry in Asia

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Background: The aim of this study is to compare the safety and efficacy of Sirolimus (SES), Paclitaxel (PES), EPC capture (ECS), Zotarolimus (ZES-R/ Endeavor Resolute), BiolimusA9 (BES) and Everolimus-eluting stent (EES) on the outcome of percutaneous coronary intervention in patients with diabetes mellitus (DM).
Methods: A prospective analysis of 2972 patients with DM (808 SES, 720 PES, 299 ECS, 404 ZES-R, 320 BES, 421 EES) in six high volume Asian centers after successful stenting was performed. The study endpoints were 30 days major adverse cardiac events (MACE) and 12, 24 and 36 months target lesion revascularization (TLR) and MACE.
Results: See table for clinical results.
Conclusions: The use of drug-eluting stents in patient with DM was safe with low acute complication. Patients treated with BES and EES showed lesser rate of restenosis compared with ECS.

		SES	PES	ECS	ZES-R	BES	EES
Number of patients		808	720	299	404	320	421
Multivessel disease (%)		76.7	72.3	73.6	79.3	75.0	75.1
MACE at 30 days (%)		0.7	1.0	1.0	1.0	0.9	0.5
Lesion length (mean: mm)		25.4	23.9	26.2	28.3*	29.9*	28.8*
Lesion type: % of B_2, C (%)		42.6	47.5	48.8	54.5	52.8	52.5
RD at baseline (mean: mm)		2.75	2.69	2.70	2.73	2.70	2.69
12 months	MLD (mean: mm)	2.51	2.34	2.00	2.52	2.56	2.55
	TLR (%)	8.9	11.0	23.1	9.9	5.6*	4.4*
	MACE (%)	11.8	13.2	25.8	12.1	8.4*	6.9*
36 months	MLD (mean: mm)	2.28	2.28	1.70	2.30	2.44	2.39
	TLR (%)	12.1	12.6	28.1	11.9	8.8*	6.9*
	MACE (%)	16.3	17.5	31.1	17.3	13.8*	12.1*

RD: reference diameter, *p<0.05 vs. ECS.

TCT-349

Drug-Eluting Stents for the Treatment of Small Coronary Artery with Diabetes Mellitus: A Comparison with Sirolimus, Paclitaxel, Zotarolimus (Endeavor Resolute), BiolimusA9, EPC Capture and Everolimus-Eluting Stent: Multicenter Registry in Asia

Sunao Nakamura[1], Shotoro Nakamura[1], Hisao Ogawa[2], Jang-Ho Bae[3], Yeo Cahyadi[4], Wasan Udayachalerm[5], Damras Tresukosol[6], Sudaratana Tansuphaswadikul[7]
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Background: The aim of this study is to compare the safety and efficacy of Sirolimus (SES), Paclitaxel (PES), Zotarolimus (ZES-R/ Endeavor Resolute), BiolimusA9 (BES), EPC capture (ECS) and Everolimus-eluting stent (EES) on the outcome of treatment of small coronary artery disease with diabetes mellitus (DM).
Methods: A prospective analysis of 1670 patients with diabetic small coronary artery stenosis (420 SES, 360 PES, 249 ZES, 200 BES, 153 ECS, 288 EES) in six high volume Asian centers after successful stent implantation was performed. The study endpoints were major adverse events (MACE) at 30 days, 12 months restenosis rate and target lesion revascularization (TLR) at 12 months.
Results: See table for clinical results.
Conclusions: The use of drug-eluting stents in patients with diabetic small coronary artery stenosis was safe and feasible. Patients treated with BES and EES showed lesser rate of restenosis compared with ECS.

		SES	PES	ZES-R	BES	ECS	EES
Number of patients		420	360	249	200	153	288
Multivessel disease (%)		75.2	72.5	76.3	75.0	75.8	77.8
MACE at 30 days (%)		1.0	0.8	0.3	1.0	0.7	0.3
Lesion length (mean: mm)		25.8	23.9	28.6*	28.0	25.6	29.8*
Lesion type: % of B_2, C (%)		54.8	55.3	53.8	57.0	57.5	57.6
Reference diameter (mean: mm)		2.44	2.43	2.47	2.48	2.45	2.43
Lesion length (mean: mm)		19.6	18.3	21.7	20.8	22.9	22.0
MLD post procedure (mean: mm)		2.32	2.28	2.39	2.35	2.33	2.31
12 months	MLD (mean: mm)	2.13	2.04	2.21	2.18	1.73	2.12
	Restenosis rate (%)	13.3	17.2	12.9	8.0**	32.7	9.4**
	TLR (%)	10.7	15.0	10.4	7.0**	26.1	6.9**
	MACE (%)	11.6	17.2	11.2	8.0**	28.1	8.0**

MLD: minimum lumen diameter, * p<0.05 vs. PES, **p<0.05 vs. ECS and PES.

POSTERS

TCT-350

Drug-Eluting Stents for the Treatment of Very Long Coronary Artery Stenosis with Diabetes Mellitus: A Comparison with Sirolimus, Paclitaxel, Zotarolimus (Endeavor Resolute), BiolimusA9, EPC Capture and Everolimus-Eluting Stent: Multicenter Registry in Asia

Sunao Nakamura[1], Shotoro Nakamura[1], Hisao Ogawa[2], Jang-Ho Bae[3], Yeo Cahyadi[4], Wasan Udayachalerm[5], Damras Tresukosol[6], Sudaratana Tansuphaswadikul[7]
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Background: The aim of this study is to compare the safety and efficacy of Sirolimus (SES), Paclitaxel (PES), Zotarolimus (ZES-R/ Endeavor Resolute), BiolimusA9 (BES), EPC capture (ECS) and Everolimus-eluting stent (EES) on the outcome of stenting in patients with diabetic very long coronary lesion (VLL) (lesion length ≥40 mm).
Methods: A prospective analysis of 1317 patients with diabetic VLL (328 SES, 280 PES, 189 ZES-R, 190 BES, 143 ECS, 187 EES) was performed. The study endpoints were major adverse cardiac events (MACE) at 12 months, restenosis rate and target lesion revascularization (TLR) at 12 months.
Results: See table for clinical results.
Conclusions: (1) The use of drug-eluting stents in patients with diabetic VLL seems to be favorable in terms of in-hospital clinical outcome and long-term results. (2) Patients treated with BES and EES showed lesser restenosis rate and TLR compared with PES and ECS.

		SES	PES	ZES-R	BES	ECS	EES
Number of patients/lesions		328/379	280/320	189/224	190/210	143/167	187/209
Lesion length (mean: mm)		47.0	46.1	42.8	43.2	42.9	47.9
Stent length (mean: mm)		57.2	59.0	53.2	56.0	51.8	52.8
In-hospital MACE (%)		1.8	1.8	1.6	0.5	1.4	0
Subacute thrombosis (%)		0.6	0.7	0.5	0	0	0
Proximal RD (mean: mm)		2.86	2.83	2.84	2.82	2.87	2.81
MLD at baseline (mean: mm)		2.61	2.56	2.59	2.57	2.69	2.66
12-month	MLD (mean: mm)	2.38	2.18	2.40	2.39	1.89	2.49
	Restenosis rate (%)	8.2	19.6	10.1	6.3*	24.5	6.4*
	TLR (%)	7.9	17.5	8.4	6.3*	21.3	6.4*

RD: reference diameter, MLD: minimum lumen diameter, *p<0.05 vs. PES and ECS.